



**18<sup>TH</sup> ANNUAL CANADIAN ECHO WEEKEND  
APRIL 7-9, 2016  
TORONTO, ON**

**Session Title:**

**Presenter/Author:**

**OBJECTIVES:** What questions or points will participants learn or discuss?

1. **What are the appropriateness criteria for echocardiography and how are they useful?**

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2. **What is value-based medicine and can it be measured?**

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3. **What is the role of appropriate use criteria in the future?**

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**DISCUSSION:** Please provide a summary of the discussion and/or include 3 to 6 key presentation slides.

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**The first Appropriate Use Criteria (AUC) document for echocardiography was first published in 2007 (transthoracic and transesophageal echo) and 2008 (stress echo). The updated AUC document 2011 decreased the number of uncertain or unclassified indications. Since the publication of this document, there has been more attention to minimizing inappropriate echocardiograms. As a result, the number of medical imaging procedures ordered for the Medicare population in the US declined by 7% between 2009-13.**

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**Although there has been a great deal of attention to correctly classifying the reason for ordering an echo, what really matters is the outcome of the patient. This introduces the concept of value based medicine. The problem is that value of an imaging test is hard to measure. There are various studies that reviewed common clinical scenarios demonstrating that outcomes are improved when echos are ordered correctly. Importantly, though, as much as we need to control over-usage of imaging, we must not allow underutilization in the appropriate situations.**

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**Therefore, AUC criteria are a just one piece of a big patient care puzzle**

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